

## DEPARTMENT OF THE AIR FORCE 59TH MEDICAL WING (AETC) JOINT BASE SAN ANTONIO - LACKLAND TEXAS

27 FEB 2017

MEMORANDUM FOR SGVT

ATTN: CAPT FAITH R. KELLY

FROM: 59 MDW/SGVU

SUBJECT: Professional Presentation Approval

- 1. Your paper, entitled Eval of Exercise Response in Young, High Risk Population: Submaximal Invasive Cardiopulmonary Exercise Testing iCPET in AD Soldiers presented at/published to American College of Cardiology's 66th Annual Scientific Session, Washington, DC, 17-19 March 2017 in accordance with MDWI 41-108, has been approved and assigned local file #17029.
- 2. Pertinent biographic information (name of author(s), title, etc.) has been entered into our computer file. Please advise us (by phone or mail) that your presentation was given. At that time, we will need the date (month, day and year) along with the location of your presentation. It is important to update this information so that we can provide quality support for you, your department, and the Medical Center commander. This information is used to document the scholarly activities of our professional staff and students, which is an essential component of Wilford Hall Ambulatory Surgical Center (WHASC) internship and residency programs.
- 3. Please know that if you are a Graduate Health Sciences Education student and your department has told you they cannot fund your publication, the 59th Clinical Research Division may pay for your basic journal publishing charges (to include costs for tables and black and white photos). We cannot pay for reprints. If you are 59 MDW staff member, we can forward your request for funds to the designated wing POC.
- 4. Congratulations, and thank you for your efforts and time. Your contributions are vital to the medical mission. We look forward to assisting you in your future publication/presentation efforts.

LINDA STEEL-GOODWIN, Col. USAF, BSC

Director, Clinical Investigations & Research Support

# PROCESSING OF PROFESSIONAL MEDICAL RESEARCH/TECHNICAL PUBLICATIONS/PRESENTATIONS

### INSTRUCTIONS

## USE ONLY THE MOST CURRENT 59 MDW FORM 3039 LOCATED ON AF E-PUBLISHING

- 1. The author must complete page two of this form:
  - a. In Section 2, add the funding source for your study [ e.g., 59 MDW CRD Graduate Health Sciences Education (GHSE) (SG5 O&M); SG5 R&D; Tri-Service Nursing Research Program (TSNRP); Defense Medical Research & Development Program (DMRDP); NIH; Congressionally Directed Medical Research Program (CDMRP); Grants; etc.1
  - b. In Section 2, there may be funding available for journal costs, if your department is not paying for figures, tables or photographs for your publication. Please state "YES" or "NO" in Section 2 of the form, if you need publication funding support.
- Print your name, rank/grade, sign and date the form in the author's signature block or use an electronic signature.
- 3. Attach a copy of the 59 MDW IRB or IACUC approval letter for the research related study. If this is a technical publication/presentation, state the type (e.g. case report, QA/QI study, program evaluation study, informational report/briefing, etc.) in the "Protocol Title" box.
- 4. Attach a copy of your abstract, paper, poster and other supporting documentation.
- 5. Save and forward, via email, the processing form and all supporting documentation to your unit commander, program director or immediate supervisor for review/approval.
- 6. On page 2, have either your unit commander, program director or immediate supervisor:
  - a. Print their name, rank/grade, title; sign and date the form in the approving authority's signature block or use an electronic signature.
- 7. Submit your completed form and all supporting documentation to the CRD for processing (59crdpubspres@us.af.mil). This should be accomplished no later than 30 days before final clearance is required to publish/present your materials. If you have any questions or concerns, please contact the 59 CRD/Publications and Presentations Section at 292-7141 for assistance.
- 8. The 59 CRD/Publications and Presentations Section will route the request form to clinical investigations, 502 ISG/JAC (Ethics Review) and Public Affairs (59 MDW/PA) for review and then forward you a final letter of approval or disapproval.
- Once your manuscript, poster or presentation has been approved for a one-time public release, you may proceed with your publication or presentation submission activities, as stated on this form. Note: For each new release of medical research or technical information as a publication/presentation, a new 59 MDW Form 3039 must be submitted for review and approval.
- 10. If your manuscript is accepted for scientific publication, please contact the 59 CRD/Publications and Presentations Section at 292-7141. This information is reported to the 59 MDW/CC. All medical research or technical information publications/presentations must be reported to the Defense Technical Information Center (DITC). See 59 MDWI 41-108, Presentation and Publication of Medical and Technical Papers, for additional information.
- 11. The Joint Ethics Regulation (JER) DoD 5500.07-R, Standards of Conduct, provides standards of ethical conduct for all DoD personnel and their interactions with other non-DoD entities, organizations, societies, conferences, etc. Part of the Form 3039 review and approval process includes a legal ethics review to address any potential conflicts related to DoD personnel participating in non-DoD sponsored conferences, professional meetings, publication/presentation disclosures to domestic and foreign audiences, DoD personnel accepting non-DoD contributions, awards, honoraria, gifts, etc. The specific circumstances for your presentation will determine whether a legal review is necessary. If you (as the author) or your supervisor check "NO" in block 17 of the Form 3039, your research or technical documents will not be forwarded to the 502 ISG/JAC legal office for an ethics review. To assist you in making this decision about whether to request a legal review, the following examples are provided as a guideline:

For presentations before professional societies and like organizations, the 59 MDW Public Affairs Office (PAO) will provide the needed review to ensure proper disclaimers are included and the subject matter of the presentation does not create any cause for DoD concern.

If the sponsor of a conference or meeting is a DoD entity, an ethics review of your presentation is not required, since the DoD entity is responsible to obtain all approvals for the event.

If the sponsor of a conference or meeting is a non-DoD commercial entity or an entity seeking to do business with the government, then your presentation should have an ethics review.

If your travel is being paid for (in whole or in part) by a non-Federal entity (someone other than the government), a legal ethics review is needed. These requests for legal review should come through the 59 MDW Gifts and Grants Office to 502 ISG/JAC.

If you are receiving an honorarium or payment for speaking, a legal ethics review is required.

If you (as the author) or your supervisor check "YES" in block 17 of the Form 3039, your research or technical documents will be forwarded simultaneously to the 502 ISG/JAC legal office and PAO for review to help reduce turn-around time. If you have any questions regarding legal reviews, please contact the legal office at (210) 671-5795/3365, DSN 473.

- NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement:
  - "The views expressed are those of the [author(s)] [presenter(s)] and do not reflect the official views or policy of the Department of Defense
- NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving humans:
  - "The voluntary, fully informed consent of the subjects used in this research was obtained as required by 32 CFR 219 and DODI 3216.02\_AFI 40-402."
- NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving animals, as required by AFMAN
  - "The experiments reported herein were conducted according to the principles set forth in the National Institute of Health Publication No. 80-23, Guide for the Care and Use of Laboratory Animals and the Animal Welfare Act of 1966, as amended."

PROCESSING OF PROFES	SIONAL MEDICAL	RESEARCH/TECHNICAL	PUBLICATIONS	PRESE	ENTATIONS
1. TO: CLINICAL RESEARCH 2. FROM: (A	uthor's Name, Rank, Gra	ade, Office Symbol)			PROTOCOL NUMBER:
Kelly, Faith	R., Capt, SGVT		X YES ☐ NO	STATES AND DESCRIPTION	C.2015.008d
PROTOCOL TITLE: (NOTE: For each new must be submitted for	v release of medical rese or review and approval.)	earch or technical information as a	publication/presentation		
High-Fidelity Hemodynamic Waveform		for Training Allied Health P	ersonnel and Resear	ch	
6. TITLE OF MATERIAL TO BE PUBLISHED	OR PRESENTED:				
Eval of Exercise Response in a Young, I	High Risk Population:	Submaximal Invasive Cardio	pulmonary Exercise	Testing	(iCPET) in AD Soldi
7. FUNDING RECEIVED FOR THIS STUDY?	YES NO FU	NDING SOURCE:			-
8. DO YOU NEED FUNDING SUPPORT FOR	R PUBLICATION PURPO	OSES: YES NO			
9. IS THIS MATERIAL CLASSIFIED?	ES 🛛 NO				
10. IS THIS MATERIAL SUBJECT TO ANY L AND DEVELOPMENT AGREEMENT (CRADA YES NO NOTE: If the answer is YE	S then attach a copy of t	R AGREEMENT (MTA), INTELLI he Agreement to the Publications	ECTIIAI DDODEDTVI	DICUTO	BORATIVE RESEARCH AGREEMENT ETC.?
11. MATERIAL IS FOR: DOMESTIC REI	EASE   FOREIGN R	ELEASE			
CHECK APPROPRIATE BOX OR BOXES  11a. PUBLICATION/JOURNAL (List interpretation)	S FOR APPROVAL WITH ended publication/journa	THIS REQUEST. ATTACH CO	PY OF MATERIAL TO	BE PUBL	ISHED/PRESENTED.
11b. PUBLISHED ABSTRACT (List inte	ended journal.)				
11c. POSTER (To be demonstrated at American College of Cardiology's 6	meeting: name of meetin	g, city, state, and date of meeting Session, Washington, DC, 17	.) 7-19 Mar 2017		
11d. PLATFORM PRESENTATION (At					
11e. OTHER (Describe: name of meeting	ng, city, state, and date o	f meeting.)			
12. HAVE YOUR ATTACHED RESEARCH/TE	ECHNICAL MATERIALS	BEEN PREVIOUSLY APPROVE	D TO BE DUBLISHED	DDECEN	TED2
YES NO ASSIGNED FILE #		DATE	D TO BE POBLISHED!	PRESEN	TED?
EXPECTED DATE WHEN YOU WILL NE     NOTE: All publications/presentations are	ED THE CRD TO SUBM	IT YOUR CLEARED PRESENTA	TION/PUBLICATION T	O DTIC	
DATE	required to be placed in	the Delense reclinical informatio	n Center (DTIC).		
February 08, 2017					
14. 59 MDW PRIMARY POINT OF CONTACT	(Last Name, First Name	e, M.I., email)	15.	DUTY PH	IONE/PAGER NUMBER
Kelly, Faith R., faith.r.kelly.mil@mail.m	iI				/4536; 210-513-2325
16. AUTHORSHIP AND CO-AUTHOR(S) List	in the order they will app	pear in the manuscript.			TO THE SECOND STATE OF THE SECOND SEC
a. Primary/Corresponding Author	GRADE/RANK	SQUADRON/GROUP/OF	FICE SYMBOL	INSTITU	TION (If not 59 MDW)
Faith R. Kelly, MD	O-3/Capt	959 CSPS/59MDW/SGVT	r .	SAMMO	
b. James A. Watts, MD	O-5/LTC	B Co/MCHE-ZDM-C		SAMMO	
c. Terry D. Bauch, MD					r Medical Center
d. Joseph P. Murgo, MD					alth Science Center
e. Bernard J. Rubal, PhD	GS-14	MCHE-ZDM-C		SAMMO	
17. IS A 502 ISG/JAC ETHICS REVIEW REQ	UIRED (JER DOD 5500.				
I CERTIFY ANY HUMAN OR ANIMAL RESEA 219, AFMAN 40-401_IP, AND 59 MDWI 41-10 ACCURATE MANUSCRIPT FOR PUBLICATION	RCH RELATED STUDIE 8. I HAVE READ THE F	S WERE APPROVED AND PERI	FORMED IN STRICT A HED MATERIAL AND (	CERTIFY	ANCE WITH 32 CFR THAT IT IS AN
18. AUTHOR'S PRINTED NAME, RANK, GRAFaith R. Kelly/Capt/O-3		19. AUTHOR'S SIGNA' KELLY FAITH ROSE 12980078			20. DATE anuary 06, 2017
21. APPROVING AUTHORITY'S PRINTED NA Gregg G. Gerasimon/LTC/O-5	AME, RANK, TITLE	22. APPROVING AUTH GERASIMON GREGG GORDON 1032598		Ξ 2	23. DATE 1 Jan 17

PROCESSING OF PROFES	SIONAL MEDIC	AL RESEA	RCH/TECHNICAL PUBLICATIONS/F	DESCRITATIONS
I ST ENDORSEMENT (59 MDW/SGVU USE C	Only)	\L  \L\\\.	NOT LECTINICAL PUBLICATIONS	RESENTATIONS
TO: Clinical Research Division 59 MDW/CRD	24. DATE RECEIVE	D	25. ASSIGNED PROCESSING REQUEST FI	LE NUMBER
	7 Feb 2017		17029	
26. DATE REVIEWED			27. DATE FORWARDED TO 502 ISG/JAC	
7 Feb 2017			EN ENTETONWANDED TO SUZ ISGUAC	
28. AUTHOR CONTACTED FOR RECOMM	ENDED OR NECESS	ARY CHANG	ES: NO XYES If yes, give date. 7 Feb	2017 N/A
29. COMMENTS X APPROVED DIS				# 100 min
The abstract and poster presentation are BAMC IRB.	approved. The auti	nor provided	the needed documentation that her activi	y was approved through the
30. PRINTED NAME, RANK/GRADE, TITLE	OF REVIEWER		31. REVIEWER SIGNATURE	
Rocky Calcote, PhD, Clinical Research				32. DATE
2nd ENDORSEMENT (502 ISG/JAC Use Onl			CALCOTE.ROCKY.D.1178245844  CALCOTE.ROCKY.D.1178245844  Calcotte.Rocky.D.1178245844  Calcotte.Rocky.D.1178245844  Calcotte.Rocky.D.1178245844  Calcotte.Rocky.D.1178245844  Calcotte.Rocky.D.1178245844  Calcotte.Rocky.D.1178245844	
33. DATE RECEIVED	<u>y)</u>		24 DATE 5000000000000000000000000000000000000	
			34. DATE FORWARDED TO 59 MDW/PA	
36. PRINTED NAME, RANK/GRADE, TITLE	OF REVIEWER	3	87. REVIEWER SIGNATURE	38. DATE
3rd ENDORSEMENT (59 MDW/PA Use Only				
39. DATE RECEIVED			40. DATE FORWARDED TO 59 MDW/SGVU	
February 23, 2017			February 23, 2017	
41. COMMENTS APPROVED (In comp		nd policy revie	ew directives.) DISAPPROVED	
42. PRINTED NAME, RANK/GRADE, TITLE (		10.00	3. REVIEWER SIGNATURE	44. DATE
Kevin Iinuma, SSgt/E-5, 59 MDW Public	c Affairs	11	NUMA.KEVIN.MITSUGU.1296227  Diputati speciality in Adult 427914 Int 12.002. 238622913  de voll. (in 4.5 d. dissemblate in 4.500 disserte), see/JAAF  see/ADMA KEVIN MITSUGA 128622913  des 2017 Ed 20 11 to 10.00 des 2017	February 23, 2017
4th ENDORSEMENT (59 MDW/SGVU Use Or	nly)			
45. DATE RECEIVED			RAUTHOR NOTIFIED BY PHONE OF APPROV	VAL OR DISAPPROVAL
47. COMMENTS APPROVED DIS	APPROVED			
48. PRINTED NAME, RANK/GRADE, TITLE (	)F REVIEWER	4	9. REVIEWER SIGNATURE	50. DATE



# Submaximal Invasive Cardiopulmonary Exercise Testing (iCPET) in Active Duty Soldiers. Evaluation of Exercise Response in a Young, High Risk Population:



Faith R. Kelly¹, James A. Watts¹, Terry D. Bauch², Joseph P. Murgo³, and Bernard. J. Rubal¹

<sup>1</sup>San Antonio Military Medical Center, <sup>2</sup>Geisinger Medical Center, <sup>3</sup>University of Texas Health Science Center at San Antonio

# Background

- evaluations to diagnose disease at an early stage given Clinical concerns raising suspicion for cardiovascular disease in active duty military require definitive high risk occupation.
- There remains limited information for assessing left and right heart hemodynamic response during supine exercise in young adults in high risk occupations.

# Objective

Provide reference values for normal hemodynamic metabolic data in patients <40 years

# Methods

- A retrospective review of 4311 catheterization records hemodynamic waveforms were ob sensor high-fidelity catheters at re active duty patients (ages: 19-40 y between 1972-92 at Brooke Army submaximal exercise testing
- 42 met inclusion criteria with for direct Fick cardiac output

(53.1±12.6 watts).



5-	7	~	
	1	i	/
	1	2	ر
(	31		7
1/	$\sim$	+1	7

			e	2003
ğ		=	id	The !
Medical Center for	E	tained with multi-	st and during supine	2 2
Gen	ears) in whom	£	iri	SRI
e e	2	3	d d	(63),
edic	rs)	ine	au	13
Š	9	ta	st	Company of the Company

J.	_			2
1	/	1 9	1	5
	TRUE F	1		7
1	11	_	1	

144	3	-	?	1
	1	ž k	1	)
,		5		1
1	π	_	12	_

	_	12		
-	E		3	
_	_	-	1	)
	1 2			
(	3			
17	7	1	1.7	27
		10		×

Table 1. Population Characteristi	General (M.) Age broad Age broad Basin (Q.M.) Basin (Q.M.) Basin (Q.M.) Basin (Q.M.) Basin (Q.M.) Basin (Q.M.) Basin (M.)	Family Hx CAD Hypartamilian Elevated Lipids
samic Waveforms r old male		for a contract of the contract
Figure 1: Hemodynamic Waveforms of a 22 year old male		his and his are as an as a selection of the selection of

# Results

		100000000000000000000000000000000000000	Reet	Exercise		
Parameter	z	Median [IQR]	MeantSD	Median [IQR]	MeantSD	-
Respiratory Rete	g	13 [10, 16]	1484	23 (20, 26)	2314	d
VE [mi/min] STPD	20	6174[5344, 7300]	636411715	34426 [18387, 90314]	240 301 8445	0.001
VO, (ml/min) STPD	×	255 [229, 290]	262143	1209 [942, 1391]	1174+828	0
VCO, (mi/min) STPD	13	208 [164, 235]	2029444	1025 [721, 1267]	9704299	0
VE/VCO, ratio	11	30 9 [28 1, 33 6]	31.094.7	34 6 [22 4, 27 6]	25 34.3.7	0.001
VE/VO, ratio	32	23.0 [10.1, 28.5]	24.5±6.9	19 8 (18 8, 23 7)	21.515.7	U
Respiratory Exchange Ratio	×	0.75 [0.70, 0.87]	0 7940 12	0.90 (0.73, 0.96)	0.8690.15	0000

		Rest		Exercise		
Parameter	z	Median [IQR]	MeantSD	Median [IQR]	10	ě
Heart Rate (bpm)	94	E4 (64, 75)	69112	110 [98, 117]	109114	0.001
Cardlac Index (L/M2)	25	34 [30, 39]	3 510 7	65 55 9, 7 9,		000
Stroke Index [ml/M2]	21	510 (45 8, 58 2)	51 9+10 6	59 0 [55 0, 68 6]		0
PA Sat	36	77.0 [76.0, 78.9]	77.252	\$5.2 [49.1, 59.5]		000
A-V O2 Difference (mi/dt)	36	37 [84, 47]	3.810.5	7877.2.421		0.00

# Hemodynamic response to exercise by patient

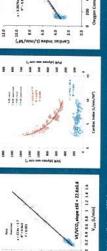
2	The state of the s	
1 1 m	f mm) rendered S C S C	
		§ 11 :
	3 NK	
ş	12	
1	210	:
E B E E	Himm) encered F F F B B	
(A)***	E S	4 .
*******		

IVED#

PCWP

ure 2: Heart rate and Strok





fourfold increase in minute ventilation, O<sub>2</sub> consumption and Results cont. Submaximal exercise was associated with approximately CO, production (P<0.001).

Heart rate, cardiac index, and stroke volume index increased  $40\pm15~\text{bpm},\ 3.2\pm1.4~\text{L/min/M}^2,\ \text{and}\ 23\pm18~\text{ml/min/M}^2,$ respectively (P<0.001).

Pulmonary artery saturations fell from 77±3% to 55±7%, and the A-VO<sub>2</sub> increase from 3.8± 0.5 to 8.3±1.5 ml/dl (P<0.001). The oxygen-uptake efficiency slope for submaximal exercise

vascular resistance with a small (<1 mm Hg) increase noted No change was noted in mRA pressure or pulmonary in RVEDP (P=0.043). Mean pulmonary capillary wedge and LVEDP increased ≈2±4 mmHg (P<0.001) with pulmonary artery systolic, diastolic and mean pressures increasing 9±4, 4±3 and 6±3 mm Hg, respectively (P<0.001)

2,727±682 mm Hg/sec and systemic vascular resistance Left ventricular dP/dt increased from 1,505±316 to decreased 37±12% dyne-sec-cm<sup>-5</sup> (P<0.001)

# Discussion

- associate symptoms such as dyspnea with underlying Clinical practice relies on the cardiologist's ability to
- Recent reviews of iCPET testing (Malhotra et al, Berry et al) demonstrate the importance of iCPET testing with respect. dyspnea in many patient populations such as heart failure. to prognosis and delineating underlying etiology of

This study provides insight into past practices of iCPET and furthers young population during supine submaximal exercise.



### DEPARTMENT OF THE ARMY BROOKE ARMY MEDICAL CENTER 3851 ROGER BROOKE DR. FORT SAM HOUSTON, TX 78234

REPLY TO

MCHE-CI February 11, 2015

MEMORANDUM FOR: Berna

Bernard Rubal, Ph.D.

FROM:

Brooke Army Medical Center (BAMC) Institutional Review Board

PROJECT TITLE:

[408191-1] High-Fidelity Hemodynamic Waveform and Data Repository for

Training Allied Health Personnel and Research

REFERENCE #:

C.2015.008d

SUBMISSION TYPE:

New Project

ACTION: APPROVAL DATE: APPROVED February 11, 2015

EXPIRATION DATE:

February 11, 2016

REVIEW TYPE:

**Expedited Review** 

 Congratulations! The Brooke Army Medical Center (BAMC) Institutional Review Board (IRB) reviewed and APPROVED your aforementioned protocol and supporting documents on February 11, 2015.
 The research is judged to constitute Minimal Risk. The protocol has been assigned control number C.2015.008d. Please refer to this designation in all correspondence.

Your protocol was reviewed for regulatory compliance under Expedited Review, in accordance with 32CFR§219.110(a) Federal Registry Categories (5) and (6). Applicable OHRP (under 45CFR46), FDA (under 21CFR§50 and 56) and HIPAA (45CFR§160 and 164) regulations were also consulted, as appropriate.

- 2. This submission has received Expedited Review based on the applicable federal regulation.
  - a. The protocol is approved to enroll up to 4,500 records
  - b. A waiver of informed consent has been approved IAW 32 CFR§219.116(d) for the entire study
  - c. A HIPAA waiver has been submitted and approved.
  - d. No funding is requested from the Department of Clinical Investigation.
- 3. All documents labelled \*FINAL within the Designer Page and Board Documents sections of IRBNet are to be utilized throughout the course of this study.
- 4. A Research Monitor is not required; protocol is no greater than minimal risk.
- 5. You are required to report all unanticipated problems involving risks to subjects or others (UPIRSOs) and Serious Adverse Events (SAEs) to the IRB. Any unanticipated adverse events must be reported to the Human Protection Administrator within 24 hours by phone at (210) 916-2598 or (210) 916-0606 or by email at BAMC\_IRB\_AE@amedd.army.mil.

- 6. Protocol C.2015.008d will automatically expire on February 11, 2016. If you plan to continue beyond this date, the required continuing review progress report is due to the BAMC IRB at least six (6) weeks before this deadline. The IRB will attempt to assist you by sending a reminder; however, submission of the continuing review report is your responsibility. Failure to submit the report on time will result in the expiration of your protocol and a requirement to cease all research activities until the entire protocol can be resubmitted.
- 7. Please be sure to maintain all records in accordance with the terms set forth in your protocol. You are required to have all records, including informed consent and HIPAA documents, available for review by the IRB or other federal agencies.
- 8. Any changes to your protocol, including any changes in personnel, may not be made without prior IRB approval. Please forward a request for any changes, along with their rationale, to the BAMC IRB for review and approval.
- 9. Please inform the IRB when the protocol is completed or changes status and forward any significant findings.
- 10. Please ensure that you remain in compliance with BAMC Memo 70-1. Review and approval of abstract and/or manuscript submissions should be made through the Department of Clinical Investigation prior to any release. Contact Ms. Ileana King-Letzkus at (210) 916-2000 for additional details.
- 11. If at any time you have questions regarding your responsibilities as a Principal Investigator, please contact Lynn Platteborze at 210-916-9425 or <a href="mailto:lynn.s.platteborze.civ@mail.mil">lynn.s.platteborze.civ@mail.mil</a>. On behalf of the entire IRB, we wish you much success with your research protocol. We look forward to reviewing the progress of your study in the coming months.

This document has been electronically signed in accordance with all applicable regulations, and a copy is retained within our records.